

STATE OF NEVADA DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH CARE FINANCING AND POLICY

1100 E. William Street, Suite 101 Carson City, Nevada 89701 (775) 684-3600

ROMAINE GILLILAND Director

LAURIE SQUARTSOFF Administrator

May 22, 2015

Inter-Tribal Council of Nevada **Executive Board President** Gerald Temoke, Tribal Chairman Elko Band Council 1745 Silver Eagle Drive Elko, Nevada 89801

Dear Tribal Members:

In accordance with established consultation guidelines, the Division of Health Care Financing and Policy (DHCFP) is notifying Nevada tribes of the following proposed change in policy.

The DHCFP has begun the process of implementing direct enrollment into managed care. This means that any Medicaid recipients eligible for managed care will be enrolled directly into their Managed Care Organization (MCO) upon approval of their Medicaid benefits. Their enrollment in their MCO would be effective the first of the month that their eligibility is approved by the Division of Welfare and Supportive Services (DWSS).

Currently a managed care eligible Medicaid recipient can spend anywhere from 6 days to 40 days in FFS Medicaid before they will enroll into their MCO. During this time they may seek services, establish a provider, and/or obtain prior authorizations for services or procedures. All of this can be disrupted or postponed in the transition from FFS into their MCO. Continuity of care is very important in the medical field and DHCFP feels that if we were to enroll a recipient directly into their MCO at the point of Medicaid approval, many issues associated with the FFS/MCO transition can be avoided.

The anticipated begin date of direct enrollment is January 1, 2016.

The following State Plan sections will be revised to reflect the changes referenced above:

- 3.0 Services: General Provisions, 3.1 Attachment F
- Alternative Benefit Plan, ABP8

American Indians and Alaskan Natives (AI/AN) who are members of federally recognized tribes will remain a voluntary population for managed care and may continue to opt out of managed care at any time. Al/ANs who voluntarily enroll in managed care may continue to access health care services from Indian Health Programs.

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There will be no fiscal impact.

If you would like a consultation regarding this new policy, please contact Tanya Benitez at (775) 684-3722 who will schedule a meeting. We would appreciate a reply within 30 days from the date of this letter. If we do not hear from you within this time, we will consider that an indication that no consultation is requested.

Sincerely,

Laurie Squartsoff Administrator

Cc: Elizabeth Aiello, Deputy Administrator

Coleen Lawrence, Chief, Program Services Laura Palotas, Program Officer, Business Lines